

Office of Charitable Gaming
P.O. Box 98502, Baton Rouge, LA 70884
(225) 925-1835 or (800) 562-9235 FAX (225) 925-7069

## **Incident Form**

Bingo Patron	_
Organization	
(check one)	

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First Name	Last Name	Phone Number
Street Address	City	State, Zip Code
	The state of the s	·
Name of Hall	Name of Organization	Data of Incident
Name of Hall	Name of Organization	Date of Incident
Witness (if any)	Address	Phone Number
IAPI Pf	Address	Dhara Markas
Witness (if any)	Address	Phone Number
	·	<u>.</u>
Evolain Nature of Complaint	of Response: (attach additional sheet	s if nocossany)
Explain Nature of Complaint	or Response. (attach additional sheet	s ii liecessary)
Signature	Date	License Number (organizations only)
Signature	Date	License Number (organizations only)

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## Incident Form

Witness Statement (attach additional sheets if necessary)				
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Witness Signature	Date			